

PI5000043828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

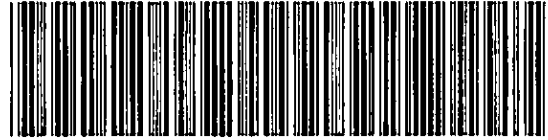
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SECRETARY OF
FALL ASSEMBLY

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ^{As} ASTERIA BEAUTY STUDIO, INC.
(Name of Corporation)

DOCUMENT NUMBER: P15000043828

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NICOLE GIBON
(Name of Person)

ASTERIA BEAUTY STUDIO, INC.
(Name of Firm/Company)

7850 SE 181st
(Address)

MONISTON FL 32668
(City/State and Zip Code)

For further information concerning this matter, please call:

NICOLE GIBON at (954) 531-8831
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION

SECRETARY OF
TALLAHASSEE, FL

2022 NOV 10 PM 2:29

FILED

I, JADE HARRIS, hereby resign as VICE PRESIDENT
(Title)

of ASTERIA BEAUTY STUDIO, INC.
(Name of Corporation)

P15000043828, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314